

## BOOK REVIEW

KENNETH DEWHURST, editor: *Willis's Oxford Casebook 1650-52*. Oxford, Sandford Publications, 1981. pp. ix + 199. 8 illustrations, colored frontispiece. £12.00.

DURING the last quarter century Dr. Kenneth Dewhurst, a British physician and psychiatrist, has written or edited a notable succession of studies, including a book on the history of cerebral function (with Dr. Edwin Clarke) and books on Hughlings Jackson, Friedrich Schiller, and the Oxford clinical school. His other volumes, which deal with Sydenham, Dover, and Locke, in addition to shorter writings in periodicals, have established him as an authority on British medicine of the 17th century. In 1980 he edited the lectures which Thomas Willis delivered at Oxford ca. 1661-1664 and which Richard Lower recorded. The book was reviewed by Dr. William Ober in the *Bulletin of the New York Academy of Medicine* (57:403-404, 1981).

The present contribution, designed as a companion volume to the lectures, is centered on an earlier period, 1650-1652. At this time, young Willis, an ex-farmer, Royalist veteran, and Oxford graduate (M.A., 1642; M.B., 1646), was an impecunious and poorly-trained medical beginner, who shared a horse with a colleague and worked as an itinerant practitioner and "piss-prophet" or urine-diagnosticator in market towns. During the same period he found time to participate energetically in the chemical, anatomical, and bibliographic activities of an Oxford club of experimental scientists, and to use chemical laboratories at Wadham College. The famous essays on fermentation and fevers (*Diatribae duae*, 1659), the great works on neuroanatomy and neuropathology (*Cerebri anatome*, 1664, and *Pathologiae cerebri ... specimen*, 1667), as well as important studies on blood, muscular movement, hysteria, and general clinical medicine (1670-1675)—all these were yet to enrich the world.

The present volume opens with a useful old-fashioned device, to wit, a chronological outline of Willis's career. The simple listing helps readers and reviewers to stay on the right track. Such tabulations should be obligatory in biographies.

The text proper contains three preliminary chapters, which successively describe Willis' early life, his first experiments in chemistry, and his start

in medical practice. These intensely interesting explanatory narratives introduce the reader to Willis' case notes, which were written in Latin and transcribed and translated by the editor.

Most of the notes run from about 150 words to about 600; a few longer entries record serial observations. Each case report is followed immediately by annotations in which Dr. Dewhurst has supplied information about the patients and their families and about the therapeutic procedures, drugs, and similar matters. In many instances he has also ventured to suggest the diagnosis. A final chapter is devoted mainly to Willis' ideas and their origins. Although the footnotes throughout the volume contain adequate references, no complete bibliographic list has been provided. The index is conscientious.

It is worth while to examine the arrangement of individual case reports. After a short title, which usually gives the date and the patient's name (a married woman being designated simply as So-and-So's wife), an initial sentence states the age, social position, location, constitution, chief complaint, and sometimes the present illness. Thus: "This young countryman, of swarthy colour and robust build, aged about 20, had spent the whole day ploughing in a biting north wind; at evening he was attacked with a rigor and had much less appetite than usual" (p. 99). Another: "This woman, aged 50, of sanguine temperament has now been afflicted for a whole week with terrible wandering pains which torture various parts of her body" (pp. 108-09). The remainder of the entry usually describes the details of treatment and the progress. In many instances there are speculations as to etiology and pathogenesis; occasionally these are elaborate.

What the modern physician misses in these records is anything analogous to a physical examination. A few reports refer very briefly to the patient's appearance. In the case of a young woman whom Willis saw on about the 14th day of peritonitis and who was to die eight days later, he laconically recorded "... I was summoned to visit this patient, and found her so weak that she could not suffer to be moved in her bed; pulse rapid and weak; sleep infrequent and disturbed ... ." Yet his implied diagnosis seems to have been close to correct, for his penultimate sentence reads "Then an abscess near her belly burst and she vomited up blood and excreted downwards foul-smelling pus."

In the complicated case of "a woman of very good family" who suffered from what may have been hiatus hernia or irritable bowel syndrome and pylorospasm, Willis wrote (p. 93), "She reveals no fault of either liver or spleen. There is mobility and softness of both hypochondria. She com-

plaints about bad digestion . . . .” A 20th century internist would probably regard the first of these three sentences as part of the past history. The second suggests, but does not clearly state, that Willis had done abdominal palpation. The third would be regarded nowadays as part of the present illness.

While it would be irrational and contrahistorical to expect a 20th century record in a 17th century document, the frequent absence or paucity of observational detail in Willis’ notes deserves a word of comment. Perhaps the deficiency is ascribable to the haste and overwork of a practitioner’s life. More probably it is evidence of defective clinical training, since Willis’ total instruction in medicine had consisted of a course of lectures which probably had lasted no more than six months. That this curriculum was accompanied or followed by extensive reading is suggested by Willis’ references to Galen, Sennert, Riverius, and Massarius. Several additional names are mentioned in connection with drugs, such as the restorative unguent of Zacutus Lusitanus; these, however, do not prove direct contact with original texts. Whatever the causes and the circumstances, the 50 case notes would not make it possible for a perceptive reader to guess that Willis would develop into a superior clinical observer, clinical innovator, and clinical writer.

At the same time, the casebook records an interest in etiology, pathogenesis, and differential diagnosis, just as it bears the mark of Willis’ leaning toward chemistry. At this point, attention should be called to the ingenious observation of Dr. Dewhurst, who shows that Willis’ later writings, such as his treatise on fermentation, contain numerous figures of speech reminiscent of the young doctor’s early activities in the farmhouse and of his familiarity with military explosives during the Civil War.

More fundamental and more significant than Willis’ early clinical procedures are his early concepts. The young physician interested in chemistry was later to become a famous protagonist of iatrochemical doctrine, although he never entirely abandoned ancient Greek humoralism. A few of the case records show the content of his thinking at the start of his medical and scientific career. In the case of the “woman of very good family” (pp. 92-95), discussed in a previous paragraph of this review, Willis reasoned along Hippocratic and Galenic lines and attributed the trouble to humors accumulated in vessels around the base of the uterus or in the stomach. Accordingly, he prescribed drugs to combat hysteria.

Two pages farther along (p. 97), the reader meets a noblewoman of melancholic temperament who had “certainly been liable to hysteric and

hypochondriacal states'' and who more recently had had hot flushes, cutaneous eruptions, and right hypochondrial pain. In this case, Willis remarked that the proper causes were not to be sought in the treasury of ancient medicine, for it must be supposed that the patient's body contained not only the commonly assigned humors but filthy excrements (metabolic products?) ''infected sometimes with a sulphurous, sometimes with a vitriolic, nitrous or aluminous quality.'' In other words, he was trying to effect a compromise between ancient humoral and modern iatrochemical concepts. Still another case record (pp. 100-101) combines humoralism, a chemical disturbance, and Sanctorio's iatromechanical concept of insensible transpiration. Mixed explanations of this kind were common not only in the 17th century but also in the 18th, as is shown in Morgagni's clinical consultations, which are to appear in English translation in the near future.

We are indebted to the Wellcome Institute for making Willis' casebook available and to Dr. Dewhurst, who has studied the annotations and their background with exemplary thoroughness. The result is at once significant, instructive, and pleasing.

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